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   DAVID S. HAGEN - SBN 110588
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4
   email: davidhagenlaw@gmail.com
5
   Attorney for Debtor
6
 7
8
                       UNITED STATES BANKRUPTCY COURT
9
                       CENTRAL DISTRICT OF CALIFORNIA
10
                        SAN FERNANDO VALLEY DIVISION
11
   In re:
                                      ) No.1:21-bk-11749-MT
12
                                         Chapter 7
   LLOYD DOUGLAS DIX,
13
                                          SCHEDULES A-J,
                                                           STATEMENT
                                         FINANCIAL AFFAIRS, STATEMENT OF
14
                                         INTENTION, STATEMENT OF ATTORNEY
                                         FEES; MEANS TEST
15
                 Debtor.
                                      ) (No hearing date)
16
17
        Debtors submits his Schedules, Statement of Financial Affairs,
18
   Statement of Intention, Statement of Attorney Fees and Means Test.
19
        Dated: November 5, 2021
20
                                           /s/ DAVID S. HAGEN
21
                                       DAVID S. HAGEN, Attorney for
                                       Debtor
22
23
24
25
26
27
28
                                     -1-
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Case 1:21-bk-11749-MT Doc 14 Filed 11/05/21 Entered 11/05/21 13:13:08 Desc

Fill in this information to identify your case:					
Debtor 1	Lloyd First Name	<b>Douglas</b> Middle Name	Dix Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: CENTRAL DIST. OF CALIFORNIA					
Case number (if known)	1:21-bk-11749-M7	Г			

☐ Check if this is an amended filing

#### Official Form 106Sum

#### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

		-
P	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$1,400,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$16,400.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$1,416,400.00
Р	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$4,299,053.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$25,473.84
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	<b>+</b> \$263,689.70
	Your total liabilities	\$4,588,216.54
Р	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$0.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$11,416.00

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Deb	otor 1	Lloyd Douglas Dix	Case number (if known) 1:21-bk-11749-MT
P	art 4	Answer These Questions for Administrative and Statistic	al Records
6.	Are	you filing for bankruptcy under Chapters 7, 11, or 13?	
		No. You have nothing to report on this part of the form. Check this box and sull Yes	omit this form to the court with your other schedules.
7.	Wha	at kind of debt do you have?	
		Your debts are primarily consumer debts. Consumer debts are those "incurr family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statist Your debts are not primarily consumer debts. You have nothing to report on this form to the court with your other schedules.	ical purposes. 28 U.S.C. § 159.
3.		m the Statement of Your Current Monthly Income: Copy your total current mocial Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	nthly income from
).	Сор	by the following special categories of claims from Part 4, line 6 of Schedule	E/F:
			Total claim
	Fro	m Part 4 on <i>Schedule E/F,</i> copy the following:	
	9a.	Domestic support obligations. (Copy line 6a.)	
	9b.	Taxes and certain other debts you owe the government. (Copy line 6b.)	
	9c.	Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	
	9d.	Student loans. (Copy line 6f.)	
	9e.	Obligations arising out of a separation agreement or divorce that you did not repriority claims. (Copy line 6g.)	port as
	9f.	Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.	+
	9g.	<b>Total.</b> Add lines 9a through 9f.	

Fill in this inf	ormation to i	dentify your cas	se and this filing:		
Debtor 1	Lloyd First Name	Douglas Middle Name	Dix Last Name	_	
Debtor 2	1 list ivallic	Widdle Name	Last Name		
(Spouse, if filing)	First Name	Middle Name	Last Name	_	
United States Ba	nkruptcy Court fo	r the: CENTRAL D	IST. OF CALIFORNIA	_	
Case number (if known)	1:21-bk-1174	9-MT			if this is an ded filing
Official Form	106A/B				
Schedule A		v			12/15
Part 1: De:  1. Do you own o	On the top of a	ny additional page Residence, Build	s, write your name and case n	nore space is needed, attach a number (if known). Answer even I Estate You Own or Have land, or similar property?	ery question.
Yes. What is a second of the s		What is Check a ☑ Sin	s the property? all that apply. gle-family home plex or multi-unit building	Do not deduct secured cla amount of any secured cla Creditors Who Have Claim Current value of the	ims on Schedule D:
Los Angeles			ndominium or cooperative	entire property?	portion you own?
County		☐ Lar	estment property neshare	Describe the nature of you interest (such as fee sime entireties, or a life estate	ple, tenancy by the
		<b>0</b> 1 1	as an interest in the property?	Fee	
		Del	one. btor 1 only btor 2 only btor 1 and Debtor 2 only least one of the debtors and ano	Check if this is comm (see instructions)	nunity property
			nformation you wish to add ab ty identification number:	oout this item, such as local	_
\$339,500. Prope per debtor is \$1 PNC Bank with \$400,000 plus as	erty is a single ,400,000 due to balance of \$30 rrearages and	family residence o extensive defer 0,000 plus arrear judgmenet lien in	with 4 bedrooms, 3 baths red maintenance required. ages, second trust deed in a favor of Carole Smith for \$	lenne St., Calabasas, CA 913 in 2694 square feet. Currei Property is subject to first favor of Wilchfort Family Ti \$150,000 and judgment lien ilchfort has set a foreclosur	nt fair market value trust deed in favor of rust with balance of in favor of Universal

Official Form 106A/B Schedule A/B: Property

\$1,400,000.00

page 1

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any

entries for pages you have attached for Part 1. Write that number here.....

Debt	tor 1	Lloyd Doug	glas Dix		Case number (if known)1:2	1-bk-11749-MT
Pa	art 2:	Describe	Your Vehicles			
Do y	ou own,	, lease, or ha	ve legal or equitable	e interest in any vehicles, whether they a vehicle, also report it on Schedule G:	•	•
3.	Cars, va	ans, trucks, t	ractors, sport utility	vehicles, motorcycles		
	□ No ✓ Yes					
Othe 201 valu	el: roximate er informa 1 Cadill ues the \$2300) Watercr	mileage: 16 ation: lac DTS (ex vehicle at be raft, aircraft, es: Boats, tra	0,000 empt) (KBB petween \$900 motor homes, ATVs	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ano Check if this is community prope (see instructions)  and other recreational vehicles, other all watercraft, fishing vessels, snowmobile	amount of any secured cla Creditors Who Have Clair Current value of the entire property?  ther \$2,000.00  erty  vehicles, and accessories	
5.	_		of the portion you	own for all of your entries from Part 2,	including any	
	entries	for pages yo	u have attached for	Part 2. Write that number here	<b></b> →	\$2,000.00
		or have any		and Household Items  terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	Example	•	•	ens, china, kitchenware		
	☐ No ✓ Yes	. Describe	Household good	ds and furnishings at residence (ex	xempt)	\$7,500.00
7.	□ No	es: Televisio	lections; electronic d	video, stereo, and digital equipment; con evices including cell phones, cameras, m tronics (exempt)500		\$0.00
8.	Example		and figurines; paintin	ngs, prints, or other artwork; books, picture collections; other collections, memorabilia	•	
	✓ No ☐ Yes	. Describe				<u> </u>
9.	Example	es: Sports, pl	• .	e, and other hobby equipment; bicycles, p tools; musical instruments	oool tables, golf clubs, skis;	_
	✓ No ☐ Yes	. Describe				]

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Deb	otor 1	Lloyd Douglas Dix		Case number (if known)	1:21-bk-11749-MT
10.	•		ammunition, and related equipment		
	✓ No ☐ Yes	. Describe			
11.	Clothes Example		eather coats, designer wear, shoes, accessori	es	
	☐ No ✓ Yes	. Describe Personal w	earing apparel on person and at reside	ence (exempt)	\$1,500.00
12.	Jewelry Example		ne jewelry, engagement rings, wedding rings,	heirloom jewelry, watches,	gems,
	☐ No ✓ Yes	. Describe Personal je	ewelry (exempt)		\$2,000.00
13.		m animals es: Dogs, cats, birds, horses			
	☐ Yes	. Describe			
14.	Any oth did not	-	l items you did not already list, including a	ny health aids you	
		. Give specific rmation			
15.		-	entries from Part 3, including any entries fo		→ \$11,000.00
P	art 4:	Describe Your Finar	ocial Assets		
Do	you own	or have any legal or equita	ble interest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Example	es: Money you have in your petition	wallet, in your home, in a safe deposit box, an	nd on hand when you file yo	ur
	✓ No ☐ Yes			Cash:	
17.	•	0.	ner financial accounts; certificates of deposit; ther similar institutions. If you have multiple a	The state of the s	
	□ No ☑ Yes		Institution name:		
	17.	Checking account:	Business checking account at First I	Bank (overdrawn)	\$0.00

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Deb	tor 1 Lloyd Douglas Dix	Case number (if known) 1:21-bk-11749-MT
18.	Bonds, mutual funds, or publicly traded stocks  Examples: Bond funds, investment accounts with brokerage firm	is, money market accounts
	✓ No  ☐ Yes Institution or issuer name:	
19.	Non-publicly traded stock and interests in incorporated and an interest in an LLC, partnership, and joint venture	unincorporated businesses, including
	No     Yes. Give specific information about them     Name of entity:	% of ownership:
20.	Government and corporate bonds and other negotiable and r Negotiable instruments include personal checks, cashiers' check Non-negotiable instruments are those you cannot transfer to som	s, promissory notes, and money orders.
	No  Yes. Give specific information about them Issuer name:	
21.	Retirement or pension accounts  Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift profit-sharing plans	savings accounts, or other pension or
	<ul> <li>No</li> <li>Yes. List each account separately. Type of account: Institution name</li> </ul>	ie:
22.	Security deposits and prepayments Your share of all unused deposits you have made so that you ma Examples: Agreements with landlords, prepaid rent, public utilities companies, or others	· · ·
	✓ No  ☐ Yes Institution name o	r individual:
23.	Annuities (A contract for a specific periodic payment of money	to you, either for life or for a number of years)
	✓ No  Yes Issuer name and description:	
24.	Interests in an education IRA, in an account in a qualified AB 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	LE program, or under a qualified state tuition program.
	No     Yes Institution name and description. Set	eparately file the records of any interests. 11 U.S.C. § 521(c)
25.	Trusts, equitable or future interests in property (other than a powers exercisable for your benefit	nything listed in line 1), and rights or
	✓ No  Yes. Give specific information about them	
26.	Patents, copyrights, trademarks, trade secrets, and other into Examples: Internet domain names, websites, proceeds from royal	• • •
	✓ No ☐ Yes. Give specific information about them	
27.	Licenses, franchises, and other general intangibles  Examples: Building permits, exclusive licenses, cooperative ass	ociation holdings, liquor licenses, professional licenses
	✓ No  Yes. Give specific information about them	

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Deb	otor 1 Lloyd Douglas Dix		Case number (if known)	1:21-bk-11749-MT
Moi	ney or property owed to you?			Current value of the portion you own?  Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you			
	No Yes. Give specific information about them, including whether you already filed the returns and the tax years			Federal: State: Local:
29.	·	ılimony, spousal support, child support, mair	ntenance, divorce settlement	t, property settlement
	<ul><li>✓ No</li><li>✓ Yes. Give specific information</li></ul>		Alimony:	
			Maintenar	nce:
			Support:	
			Divorce se	ettlement:
			Property s	ettlement:
31.	No ✓ Yes. Name the insurance company of each policy	insurance; health savings account (HSA); company name:	redit, homeowner's, or rente Beneficiary:	r's insurance Surrender or refund value:
	d w d v w d	/hole life insurance policy on life of ebtor issued by Metlife for which rife Mary Dix is beneficiary with eath benefit of \$150,000 and cash alue of \$3400  /hole life insurance policy on life of ebtor issued by Metlife for which rife Mary Dix is beeficiary with death enefit of \$100,000 and nominal ash value		
		exempt)	Wife	\$3,400.00
	T A fo	erm life insurance policy issued by IG with death benefit of \$500,000 or which wife is beneficiary (no alue to estate)	Wife	\$0.00
32.	If you are the beneficiary of a living entitled to receive property because	ue you from someone who has died trust, expect proceeds from a life insurance e someone has died	policy, or are currently	
	<ul><li>✓ No</li><li>✓ Yes. Give specific information</li></ul>			

# Case 1:21-bk-11749-MT Doc 14 Filed 11/05/21 Entered 11/05/21 13:13:08 Desc Main Document Page 9 of 56

Deb	tor 1	Lloyd Douglas Dix	Case number (if known)	1:21-bk-11749-MT
33.		-	r not you have filed a lawsuit or made a demand for payment tes, insurance claims, or rights to sue	
	✓ No ☐ Yes	. Describe each claim		
34.	rights t	ontingent and unliquidated clair o set off claims	ms of every nature, including counterclaims of the debtor and	
	✓ No ☐ Yes	. Describe each claim		
35.	Any fin	ancial assets you did not alread	y list	
	✓ No ☐ Yes	. Give specific information		
36.		_	es from Part 4, including any entries for pages you have here	→ \$3,400.00
Pa	art 5:	Describe Any Business-Re	elated Property You Own or Have an Interest In. List	any real estate in Part 1
37.	Do you	own or have any legal or equita	ble interest in any business-related property?	
	سنا	Go to Part 6.		
	☐ Yes	. Go to line 38.		
				Current value of the portion you own?  Do not deduct secured claims or exemptions.
38.	Accour	ts receivable or commissions y	ou already earned	·
	✓ No ☐ Yes	. Describe		
39.	Exampl	equipment, furnishings, and sup es: Business-related computers, s desks, chairs, electronic device	software, modems, printers, copiers, fax machines, rugs, telephones	,
	✓ No ☐ Yes	. Describe		
40.	Machin	ery, fixtures, equipment, supplie	es you use in business, and tools of your trade	
	✓ No ☐ Yes	. Describe		
41.	Invento	ry		
	<b>☑</b> No			
	☐ Yes	. Describe		
42.	Interes	s in partnerships or joint ventur	res	
	✓ No ☐ Yes	. Describe Name of entity:	% of owners	hip:

Deb	tor 1	Lloyd Douglas Dix	Case number (if known)	1:21-bk-11749-MT
43.	Custom	ner lists, mailing lists, or other compilations		
	✓ No ☐ Yes	s. Do your lists include personally identifiable inform  No  Yes. Describe	nation (as defined in 11 U.S.C. § 101(41A))?	
44.	Any bu	siness-related property you did not already list		
	✓ No ☐ Yes	s. Give specific information.		
45.		e dollar value of all of your entries from Part 5, includ d for Part 5. Write that number here		→ \$0.00
P		Describe Any Farm- and Commercial Fishi If you own or have an interest in farmland, list i		ave an Interest In.
46.	Do you	own or have any legal or equitable interest in any fa	rm- or commercial fishing-related property	?
	_	Go to Part 7. Go to line 47.		
				Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	•	nimals es: Livestock, poultry, farm-raised fish		
	✓ No ☐ Yes	·		
48.	Crops	either growing or harvested		
	_	s. Give specific		
49.	Farm a	nd fishing equipment, implements, machinery, fixture	es, and tools of trade	
	✓ No ☐ Yes	i		
50.	Farm a	nd fishing supplies, chemicals, and feed		
	✓ No ☐ Yes	i		
51.	Any far	m- and commercial fishing-related property you did	not already list	_
	_	s. Give specific		
52.		e dollar value of all of your entries from Part 6, includ	ling any entries for pages you have	\$0.00

Deb	otor 1	Lloyd Douglas Dix	Case nu	umber (if known) 1:	21-bk-	11749-MT
P	art 7:	Describe All Property You Own or Have an Ir	nterest in That You [	Did Not List Abo	ve	
53.	-	have other property of any kind you did not already liseles: Season tickets, country club membership	it?			
	✓ No	s. Give specific information.				
54.	Add th	e dollar value of all of your entries from Part 7. Write th	nat number here	<b>-</b>	<b>»</b> [	\$0.00
P	art 8:	List the Totals of Each Part of this Form				
55.	Part 1:	Total real estate, line 2			<b>&gt;</b> _	\$1,400,000.00
56.	Part 2:	Total vehicles, line 5	\$2,000.00			
57.	Part 3:	Total personal and household items, line 15	\$11,000.00			
58.	Part 4:	Total financial assets, line 36	\$3,400.00			
59.	Part 5:	Total business-related property, line 45	\$0.00			
60.	Part 6:	Total farm- and fishing-related property, line 52	\$0.00			
61.	Part 7:	Total other property not listed, line 54	+ \$0.00			
62.	Total p	personal property. Add lines 56 through 61	\$16,400.00	Copy personal property total	+	\$16,400.00
63.	Total o	of all property on Schedule A/B. Add line 55 + line 62				\$1,416,400,00

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Main Do	cument	Page	12 of 56			

Fill in this inf	ormation to iden	tify your case:	:		
Debtor 1	Lloyd First Name	<b>Douglas</b> Middle Name	<b>Dix</b> Last Name	_	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	-	
United States Bar	nkruptcy Court for the	-  _	Check if this is a		
Case number (if known)	1:21-bk-11749-M	Γ			amended filing

#### Official Form 106C

#### Schedule C: The Property You Claim as Exempt

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds--may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the Property You Claim as Exemp

1.	Which set of exemptions are you claiming?	Check one only.	even if your spouse is filing	with you.						
	You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)									
2.	2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.									
Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption						
		Copy the value from Schedule A/B	Check only one box for each exemption							

Are you claiming a homestead exemption of more than \$170,350?

(Sul	bject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)
$\overline{\mathbf{V}}$	No
	Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
	□ No
	Yes

Deptor 1	Lioya Douglas Dix			Case numbe	r (if known) 1:21-bk-11749-MT
Part 2:	Additional Page				
	ption of the property and line on /B that lists this property	Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B		eck only one box for h exemption	
Brief description: Residence Debtor and his non filing spouse ourchased their residence at 22413 Dardenne St., Calabasas, CA 91302 in 5/1994 for \$339,500. Property is a single family residence with 4 bedrooms, 3 baths in 2694 square feet. Current fair market value per debtor is \$1,400,000 due to extensive deferred maintenance required. Property is subject to first trust deed in favor of PNC Bank with balance of \$300,000 plus arrearages, second trust deed in favor of Wilchfort Family Trust with balance of \$400,000 plus arrearages and fudgmenet lien in favor of Carole Smith for \$150,000 and judgment lien in favor of Universal Accounts for \$3,400,000 Debtor resides in the property with his wife. Wilchfort has set a foreclosure sale for 10/25/2021 (Exempt) Line from Schedule A/B:11		\$1,400,000.00		\$600,000.00  100% of fair market value, up to any applicable statutory limit	C.C.P. § 704.730
2011 Cadil he vehicle	otion: lac DTS (approx. 160,000 miles) lac DTS (exempt) (KBB values e at between \$900 and \$2300) Chedule A/B:3.1	\$2,000.00		\$2,000.00 100% of fair market value, up to any applicable statutory limit	C.C.P. § 704.010
esidence	l goods and furnishings at	\$7,500.00	回	\$7,500.00 100% of fair market value, up to any applicable statutory limit	C.C.P. § 704.020
	otion: d electronics (exempt)500 chedule A/B:7	\$0.00		\$0.00 100% of fair market value, up to any applicable statutory limit	C.C.P. § 704.020
at residen	otion: vearing apparel on person and ce (exempt) chedule A/B:11	\$1,500.00		\$1,500.00 100% of fair market value, up to any applicable statutory limit	C.C.P. § 704.020
_	otion: ewelry (exempt) chedule A/B: 12	\$2,000.00		\$2,000.00 100% of fair market value, up to any applicable statutory limit	C.C.P. § 704.040

### Case 1:21-bk-11749-MT Doc 14 Filed 11/05/21 Entered 11/05/21 13:13:08 Desc Main Document Page 14 of 56

Debtor 1	Lloyd Douglas Dix			Case number	(if known) 1:21-bk-11749-MT
Part 2:	Additional Page				
Schedule A/B that lists this property		Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
		Copy the value from Schedule A/B		eck only one box for h exemption	
Brief description: Whole life insurance policy on life of debtor issued by Metlife for which wife Mary Dix is beneficiary with death benefit of \$150,000 and cash value of \$3400 Whole life insurance policy on life of debtor issued by Metlife for which wife Mary Dix is beeficiary with death benefit of \$100,000 and nominal cash value		\$3,400.00		\$3,400.00 100% of fair market value, up to any applicable statutory limit	C.C.P. § 704.100(b)
(exempt)					
Line from S	Schedule A/B: <b>31</b>				
with deat wife is be	iption: insurance policy issued by AIG h benefit of \$500,000 for which eneficiary (no value to estate) Schedule A/B: 31	\$0.00		\$0.00 100% of fair market value, up to any applicable statutory limit	C.C.P. § 704.100(b)

Fill in this inf	ormation to iden	tify your case	e:				
Debtor 1	Lloyd	Douglas	Dix				
<b>D</b> 1. 0	First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bar	nkruptcy Court for the:	CENTRAL DI	ST. OF CALIFORNIA	<u> </u>			
Case number	1:21-bk-11749-MT	7				☐ Check if this is	s an
(if known)						amended filing	
Official Form	106D						
Schedule D:	: Creditors Wh	o Have Cla	aims Secured b	y Prope	erty		12/15
On the top of any  1. Do any credit  □ No. Che □ Yes. Fill  Part 1: Lis  2. List all securclaim, list the creditor has a	additional pages, writers have claims secured this box and submininal of the information of the content of the	ured by your protest this form to the on below.  ims  or has more than each claim. If me other creditors	operty? court with your other so one secured nore than one sin Part 2. As	Column Amount Do not c	ou have noth	es, and attach it to this	
2.1			e property that		\$1,500.00	\$1,400,000.00	
Capital One Ban	ık	secures the — Lien on cr	edit card judgment		<del>, , , , , , , , , , , , , , , , , , , </del>		
Creditor's name  c/o Patenaude &	Felix	_	, ,				
Number Street 9616 Chesapeak	ke Dr #300						
		As of the da	ate you file, the claim i	is: Check al	I that apply.		
San Diego	CA 92123	🗖 Unliquid	lated				
Who owes the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  ✓ Check if this claim relates  ✓ Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)  ✓ Judgment lien from a lawsuit  Other (including a right to offset)							
to a communit		Look 4 dimit	o of account number	0 5	0 1		

Add the dollar value of your entries in Column A on this page. Write that number here:

\$1,500.00

Debtor 1 Lloyd Douglas Dix		Case number (if known) 1:21-bk-11749-MT					
Part 1: Additional Page After listing any entries on sequentially from the previous		Column A  Amount of claim  Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any			
2.2	Describe the property that secures the claim:	\$150,000.00	\$1,400,000.00				
Carole Smith Creditor's name c/o Michael Jonathan Wise Number Street Perkins Coie	Residence						
1888 Century Park East #1700  Los Angeles CA 90067  City State ZIP Code  Who owes the debt? Check one.  ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)						
Date debt was incurred 2019	Last 4 digits of account number	0 8 0 5					
Malpractice default judgment. Credit	, ,						
2.3	Describe the property that secures the claim:	\$24,000.00	\$1,400,000.00				
Network Commercial Services Creditor's name c/o Aposta, Inc. Number Street 1057 E. Imperial Hwy	Residence						
Placentia  CA 92870  City State ZIP Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	As of the date you file, the claim is:  Contingent Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as Statutory lien (such as tax lien, me	mortgage or secured	car loan)				
Check if this claim relates to a community debt	Other (including a right to offset)						
Date debt was incurred 2013	Last 4 digits of account number	6 3 0 8					
Judgment relating to school tuition fr	om Viewpoint School						

Add the dollar value of your entries in Column A on this page. Write that number here:

\$174,000.00

Debtor 1	Lloyd Douglas Dix		_ Case number (if	known) 1:21-bk-11	749-MT				
Part 1:	Additional Page After listing any entries on sequentially from the previ		Column A  Amount of claim  Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any				
2.4	-	Describe the property that secures the claim:	\$323,553.00	\$1,400,000.00					
PNC Morto	gage	- Residence							
Creditor's nam		- Residence							
<b>Attn: Bank</b> Number Str	reet	-							
PO Box 88	119	-							
		As of the date you file, the claim is:	Check all that apply.						
Davidan	011 45404	Contingent							
<b>Dayton</b> City	OH 45401 State ZIP Code	Unliquidated							
•	the debt? Check one.	Disputed							
Debtor 1		Nature of lien. Check all that apply.	mortaga or gooured	oor loon)					
Debtor 2		An agreement you made (such as mortgage or secured car loan)							
Debtor 1	1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit							
At least	one of the debtors and another	✓ Other (including a right to offset)							
_	f this claim relates nmunity debt	Credit Line Secured							
Date debt w	as incurred 08/2006	_ Last 4 digits of account number	7 3 4 7						
2.5		Describe the property that secures the claim:	\$3,400,000.00	\$1,400,000.00	\$2,873,553.00				
	Accounts LLC	- Residence							
Creditor's nam c/o Guy Ja									
Number Str	reet	-							
Jamison L	aw Firm PC	-							
301 E. Col	orado Blvd. #510	As of the date you file, the claim is:	Check all that apply.						
Pasadena	CA 91101	Contingent  Unliquidated							
City	State ZIP Code								
Who owes t	the debt? Check one.	Nature of lien. Check all that apply.							
✓ Debtor 1	1 only	An agreement you made (such as	s mortgage or secured	car loan)					
Debtor 2	2 only	Statutory lien (such as tax lien, m		our rourry					
_	1 and Debtor 2 only	☐ Judgment lien from a lawsuit	· · · · · · · · · · · · · · · · ·						
At least	one of the debtors and another	Other (including a right to offset)							
	f this claim relates nmunity debt	Judgment lien							
Date debt w	as incurred 2020	Last 4 digits of account number	1 6 7 2						

Add the dollar value of your entries in Column A on this page. Write that number here:

\$3,723,553.00

Lien to be avoided

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Debtor 1	Lloyd Doug	glas Dix		Case number (if known) 1:21-bk-11749-MT				
Part 1:		•	this page, number them ous page.	Column A  Amount of claim  Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any		
2.6  Wilchfort F Creditor's name PO Box 256 Number Streen	623		Describe the property that secures the claim: 2nd trust deed	\$400,000.00	\$1,400,000.00			
Los Angeles CA 90025 City State ZIP Code  Who owes the debt? Check one.  ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates			As of the date you file, the claim is:  Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, multiple) Judgment lien from a lawsuit Other (including a right to offset)	s mortgage or secured	car loan)			
Date debt wa	nmunity debt as incurred	6/26/2018	Last 4 digits of account number					
•	•	became due an r 10/25/2021	d payable on 8/1/2021 and then e	xtended by agreen	nent but the extensi	ion time expired		

Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$400,000.00

\$4,299,053.00

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Debtor 1	Lloyd Douglas Dix			Case number (if known)1:21-bk-11749-MT	
Part	2: List Others to Be Notified	for a	Debt That You	Already Listed	
example then list list the	e, if a collection agency is trying to co t the collection agency here. Similarly	llect fro , if you	m you for a debt yo have more than on	ccy for a debt that you already listed in Part 1. For ou owe to someone else, list the creditor in Part 1, and e creditor for any of the debts that you listed in Part 1, to be notified for any debts in Part 1, do not fill out or	
1	California Private Lenders			On which line in Part 1 did you enter the creditor?	2.6
	Name 23945 Calabasas Rd., Suite 209			Last 4 digits of account number	
	Number Street			_	
	Calabasas	CA	91302	-	
	City	State	ZIP Code	-	
2	Ress Financial Corporation, Trust	ee		On which line in Part 1 did you enter the creditor?	2.6
	Name 1780 Town & Country Drive			Last 4 digits of account number 8 0 2 4	
	Number Street				
	Suite 105			-	
	Norco	CA	92860-3618	-	
	City	State	ZIP Code	-	

					_				
Fill in this info	ormation to id	entify your o	case:						
Debtor 1	Lloyd	Douglas		Dix					
	First Name	Middle Name		Last Name					
Debtor 2									
(Spouse, if filing)	First Name	Middle Name		Last Name					
United States Bar	nkruptcy Court for	the: <b>CENTRAL</b>	DIST. O	F CALIFORNIA					
Case number	1:21-bk-11749-	MT					г	7 Check if this is a	an
(if known)							_	amended filing	
Official Form	106E/F				_				
Schedule E/	F: Creditors	Who Hav	e Unse	cured Claims					12/15
claims. List the of on Schedule A/B: Do not include any If more space is not on this page. On the	ther party to any o Property (Official y creditors with p eeded, copy the F	executory cont Form 106A/B) artially secured Part you need, f itional pages, v	racts or ur and on So d claims th fill it out, n vrite your	editors with PRIORITY of nexpired leases that concidence of the co	uld re ontra le D: e box	sult in a cts and Credito es on tl	a claim. ' Unexpir rs Who I	Also list executory ed Leases (Officia Hold Claims Secure	y contracts I Form 106G). ed by Property.
<ol> <li>Do any credit</li> <li>No. Go to</li> </ol>	ors have priority	unsecureu ciai	ilis agailis	st your					
☐ No. Go to	O Fait 2.								
claim. For each show both price more space is claim, list the control of the cont	ch claim listed, ide prity and nonpriority needed for priority other creditors in P	ntify what type on the control of th	of claim it is much as po ms, fill out	as more than one priority  If a claim has both prionsible, list the claims in a the Continuation Page of	ority an alphal f Part	nd nonp petical of 1. If m	oriority am order acco ore than	nounts, list that clair ording to the credito	n here and or's name. If
(For an explan	nation of each type	of claim, see th	e instructio	ons for this form in the ins	structi	on book • <b>Total</b>		Priority	Nonpriority
						Total	Ciaiiii	amount	amount
2.1						Un	known	Unknown	Unknown
Franchise Tax B			-last4 d	igits of account number	· 1	7	1 7		
Priority Creditor's Name PO Box 942867	e			as the debt incurred?	_	_ <u> </u>			
Number Street			_ WIIGH W	as the dept incurred?	201	1-2020	,	_	
-				e date you file, the clain	ı is: (	Check a	ıll that ap	ply.	
			_ 🛏	tingent quidated					
Sacramento		<b>94267-0001</b> ZIP Code		uted					
City Who incurred the			Type of	PRIORITY unsecured c	aim·				
Debtor 1 only	<b></b>			estic support obligations	u				
Debtor 2 only	Achter 2 only		<b>₩</b> Taxe	es and certain other debts				nent	
Debtor 1 and D  At least one of	the debtors and ar	nother		ms for death or personal cicated	injury	while yo	ou were		
ш	laim is for a com			er. Specify					
Is the claim subject	ct to offset?		_						
✓ No Yes									

Debtor 1 Lloyd Douglas Dix	Case number (if known) 1:21-bk-11749-MT				
Part 1: Your PRIORITY Unsecured C	laims Continuation Page				
After listing any entries on this page, number the previous page.	n sequentially from the		Priority amount	Nonpriority amount	
2.2   Internal Revenue Service	- Last 4 digits of account number  When was the debt incurred?  - As of the date you file, the claim  Contingent Unliquidated Disputed  Type of PRIORITY unsecured cl  Domestic support obligations  Taxes and certain other debts Claims for death or personal intoxicated Other. Specify	2011-2020  a is: Check all that apply.  aim:		Unknown	
2.3  LA County Tax Collector  Priority Creditor's Name PO Box 512102  Number Street	<ul> <li>Last 4 digits of account number</li> <li>When was the debt incurred?</li> </ul>	2019-2020	\$25,473.84	\$0.00	
Los Angeles City State ZIP Code  Who incurred the debt? Check one.  ☑ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another ☑ Check if this claim is for a community debt  Is the claim subject to offset? ☑ No ☐ Yes	<ul> <li>As of the date you file, the claim</li> <li>☐ Contingent</li> <li>☐ Unliquidated</li> <li>☐ Disputed</li> <li>Type of PRIORITY unsecured cl</li> <li>☐ Domestic support obligations</li> <li>☑ Taxes and certain other debts</li> <li>☐ Claims for death or personal intoxicated</li> <li>☐ Other. Specify</li> </ul>	aim: you owe the governmen			

Debt	or 1 <u>L</u> l	loyd Doug	las Dix		Case number (if known) 1:21-bk-11749-MT
Pa	rt 2:	List All of	Your	NONPRIORIT	Y Unsecured Claims
3.	Do any cr	reditors have	e nonpr	iority unsecured	claims against you?
	□ No. ` ✓ Yes	You have no	thing to	report in this part.	Submit this form to the court with your other schedules.
	If a credito type of cla	or has more taim it is. Do	than one not list c	nonpriority unsed laims already incl	in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed, identify what uded in Part 1. If more than one creditor holds a particular claim, list the other creditors in insecured claims, fill out the Continuation Page of Part 2.
					Total claim
4.′	1				\$2,413.00
	A Collecti				Last 4 digits of account number 8 8 0 3
	riority Credito : Banrku				When was the debt incurred? 05/16/2019
Numb	er Stre	eet			As of the date you file, the claim is: Check all that apply.
100	Church S	Street			_ Contingent
					☐ Unliquidated ☐ Disputed
Dick	cson		TN	37055	
City <b>Who</b>	incurred	the debt?	State Check	ZIP Code one.	Type of NONPRIORITY unsecured claim:
Ø [	Debtor 1 or	nly			☐ Student loans ☐ Obligations arising out of a separation agreement or divorce
_	Debtor 2 or	,			that you did not report as priority claims
_		nd Debtor 2 of the debt		another	☐ Debts to pension or profit-sharing plans, and other similar debts
ш.					✓ Other. Specify
				mmunity debt	Medical collection for SCOI
	e ciaiiii su No	ubject to offs	set?		
<u> </u>	Yes				
4.2	2				\$2,742.00
Cap	ital One				Last 4 digits of account number 5 2 1 2
	riority Credito : Bankru				When was the debt incurred? 08/2019
Numb	er Stre	eet			As of the date you file, the claim is: Check all that apply.
PO E	Box 3028	35			_ Contingent
					☐ Unliquidated ☐ Disputed
Salt	Lake Cit	y	UT	84130	
City	incurred	the deht?	State Check	ZIP Code	Type of NONPRIORITY unsecured claim:
	Debtor 1 or		Oncor	0110.	Student loans
بخا	Debtor 2 or	•			Obligations arising out of a separation agreement or divorce that you did not report as priority claims
		nd Debtor 2			Debts to pension or profit-sharing plans, and other similar debts
_		e of the debt			Other. Specify
_				mmunity debt	Credit Card
		ubject to offs	set?		
٠.	No Yes				

Debtor 1 Lloyd Douglas Dix Case number (if known) 1:21-bk-11749-MT Your NONPRIORITY Unsecured Claims -- Continuation Page Part 2: After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.3 \$1,196.00 Last 4 digits of account number Capital One 9 1 8 5 Nonpriority Creditor's Name When was the debt incurred? 11/2018 Attn: Bankruptcy As of the date you file, the claim is: Check all that apply. Number Street PO Box 30285 Contingent Unliquidated Disputed Salt Lake City UT 84130 ZIP Code State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only  $\square$ Obligations arising out of a separation agreement or divorce Debtor 2 only П that you did not report as priority claims Debtor 1 and Debtor 2 only П Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify  $\overline{\mathbf{Q}}$ ☐ Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? No Yes 4.4 Unknown Capital One Bank Last 4 digits of account number 9 5 9 1 Nonpriority Creditor's Name When was the debt incurred? c/o Raymond Patenaude As of the date you file, the claim is: Check all that apply. Number Street Patenaude & Felix APC Contingent Unliquidated 9619 Chesapeake Dr. #350 Disputed San Diego 92123-1382 CA ZIP Code Type of NONPRIORITY unsecured claim: Check one. Who incurred the debt? Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only П that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other, Specify  $\overline{\mathbf{Q}}$ Check if this claim is for a community debt Credit Card collection Is the claim subject to offset? **☑** No Yes 4.5 \$20,957.00 Last 4 digits of account number **Chase Card Services** 8 0 9 5 Nonpriority Creditor's Name When was the debt incurred? 05/2012 Attn: Bankruptcy As of the date you file, the claim is: Check all that apply. PO Box 15298 Contingent Unliquidated □ Disputed Wilmington DE 19850 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify  $\square$ Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? No  $\square$ 

☐ Yes

Lioyd Douglas Dix	Case number (if known) 1:21-bk-1	1749-MT
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.6		\$494.00
Chase Card Services	Last 4 digits of account number 0 7 7 3	
Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred? 02/1993	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 15298	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Wilmington DE 19850		
City State ZIP Code  Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?  No		
☑ No □ Yes		
4.7		\$16,873.31
Employment Development Dept	Last 4 digits of account number1386_	
Nonpriority Creditor's Name PO Box 989061	When was the debt incurred? 2013-2016	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent Unliquidated	
	— ☑ Disputed	
W. Sacramento         CA         95798-9061           City         State         ZIP Code	_	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify	
Is the claim subject to offset?	Corporate payroll taxes	
✓ No		
Yes		
4.8		\$100,000.00
Jimi Bingham Nonpriority Creditor's Name	Last 4 digits of account number	
2843 Geary Place	When was the debt incurred? 2020	
Number Street Unit 3106	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
Las Vanas NV 00400	Disputed	
Las Vegas         NV         89109           City         State         ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Personal loan	
Is the claim subject to offset?		
<b>☑</b> No		
Yes		

Lioyd Douglas Dix	Case number (if known) 1:21-bk-1	749-MT
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.9		\$2,070.00
Judicial Legal Services Nonpriority Creditor's Name	Last 4 digits of account number	
13351 Riverside D.	When was the debt incurred? 2020	
Number Street D497-PMB	As of the date you file, the claim is: Check all that apply.	
D437-F IVID	Contingent Unliquidated	
0. 0. 0. 0. 0. 0.	Disputed	
Sherman Oaks         CA         91423           City         State         ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Attorney services	
Is the claim subject to offset?	·	
No You		
Yes		
4.10		\$2,239.98
Las Virgenes Municipal Water Dist.	Last 4 digits of account number 0 3 5 8	
Nonpriority Creditor's Name 4322 Las Virgenes Rd.	When was the debt incurred? 2021	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent Unliquidated	
	☐ Disputed	
Calabasas         CA         91302           City         State         ZIP Code	— (NANDRIADIEN)	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:  Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Water services	
Is the claim subject to offset?		
☑ No		
Yes		
4.11		\$7,887.57
Pansky Markle	Last 4 digits of account number	
Nonpriority Creditor's Name 1010 Sycamore Ave #308	When was the debt incurred? 2020	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
S. Pasadena CA 91030		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify  Attorney services	
Is the claim subject to offset?	Automoy solvidos	
✓ No		
Yes		

Debtor 1 Lloyd Douglas Dix	Case number (if known) 1:21-bk-1	1749-MT
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.12		\$1,371.54
Providence Tarzana Hopsital	Last 4 digits of account number	
Nonpriority Creditor's Name 18321 Clark St.	When was the debt incurred? 2020	
Number Street	As of the date you file, the claim is: Check all that apply.	
-	Contingent Unliquidated	
	☐ Disputed	
Tarzana         CA         91356           City         State         ZIP Code		
Who incurred the debt? Check one.  ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☑ Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  Medical	
Is the claim subject to offset?  No Yes  4.13		¢4.250.40
	Last 4 digits of account number 7 3 4 5	\$4,359.19
Southern California Edison Co. Nonpriority Creditor's Name	Last 4 digits of account number 7 3 4 5  When was the debt incurred? 2021	
PO Box 6400	As of the date you file, the claim is: Check all that apply.	
Number Street	_ ☐ Contingent	
	Unliquidated	
Rancho Cucamonga CA 91729-6400	Disputed	
City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt  Is the claim subject to offset?  No Yes	Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  Utilities	
4.14		\$101,086.11
State Bar of California	Last 4 digits of account number 5 1 R S	
Nonpriority Creditor's Name Client Security Fund	When was the debt incurred? 2020	
Number Street	As of the date you file, the claim is: Check all that apply.	
180 Howard St.	_ Contingent	
	☐ Unliquidated ☐ Disputed	
San Francisco CA 94105		
City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?	Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  Stipulated judgment	
✓ No  Yes		

Debtor 1 Lloyd Douglas Dix	Case number (if known)1:21-bk-11749-N							
Part 2: Your NONPRIORITY Unsecured Claims Continuation Page								
After listing any entries on this page, number t previous page.	hem sequentially from the	Total claim Unknown						
Universal Accounts, LLC Nonpriority Creditor's Name c/o Guy Jamison, Esq Number Street	Last 4 digits of account number  When was the debt incurred? 2020  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed							
City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt  Is the claim subject to offset?  No Yes	Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify 20STCV01672							

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Debtor 1	Lloyd Douglas Dix	Case number (if known) _ 1:21-bk-11749-MT
Part 3:	List Others to Be Notifi	ed About a Debt That You Already Listed
For ex credite debts	cample, if a collection agency is or in Parts 1 or 2, then list the co	to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. trying to collect from you for a debt you owe to someone else, list the original ollection agency here. Similarly, if you have more than one creditor for any of the st the additional creditors here. If you do not have additional parties to be notified for it or submit this page.
Harris & H	Harris	On which entry in Part 1 or Part 2 did you list the original creditor?
Name 111 W. Jackson Blvd.  Number Street		Line 4.12 of (Check one): Part 1: Creditors with Priority Unsecured Claims
		Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**60604** ZIP Code

IL State <u>8</u> <u>3</u> <u>0</u> <u>5</u>

Chicago City

Debtor 1	Lloyd Douglas Dix	Case number (if known)	1:21-bk-11749-MT
		Odde Hulliber (II Kilowil)	ILE I DIC I I I TO IVI I

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$25,473.84
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	<sup>6d.</sup> <b>+</b>	\$0.00
	6e.	<b>Total.</b> Add lines 6a through 6d.	6d.	\$25,473.84
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i. <b>+</b>	\$263,689.70
	6j.	<b>Total.</b> Add lines 6f through 6i.	6j.	\$263,689.70

Fill in this inf	ormation to ider	tify your case	:	
Debtor 1	Lloyd First Name	<b>Douglas</b> Middle Name	<b>Dix</b> Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the	E CENTRAL DIS	T. OF CALIFORNIA	
Case number (if known)	1:21-bk-11749-M	Т		Check if this amended fili

Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

    Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Fill in this inf	ormation to ident			
Debtor 1	Lloyd First Name	Douglas Middle Name	Dix Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	CENTRAL DIST. C	OF CALIFORNIA	
Case number (if known)	1:21-bk-11749-MT	•		Check if this is an amended filing

#### Official Form 106H

#### **Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1.	•	<b>ou h</b> No Yes	ave any codebtors?	(If you are filing a	joint case, d	o not list either sp	ouse as a codebtor.)
2.	inclu	ide A No.	• •	o, Louisiana, Neva	da, New Mex	ico, Puerto Rico,	tory? (Community property states and territories Texas, Washington, and Wisconsin.) e time?
			In which community statement of the community st	ner spouse, or legal ed	_	California  91302 ZIP Code	Fill in the name and current address of that person.  ———————————————————————————————————

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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	ill in this inform	ation to	identify your case:								
	Debtor 1	Lloyd	Douglas	Dix							
		First Name	Middle Name	Last Name			— Che	eck if this is:			
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			_  _	An amended filing	g		
					DNIA			A supplement she	owing postpe	tition	
	Case number		for the: CENTRAL D 11749-MT	131. OF CALIFO	NINA		-	chapter 13 incom	e as of the fo	ollowing date:	
	(if known)	1.21 DR	117-45-1111		_			MM / DD / YYYY			
Of	ficial Form 10	61									
Sc	hedule I: Yo	ur Incor	me							12/15	
inc abo you	lude information about your spouse. If ir name and case n	oout your s more spac	t information. If you are pouse. If you are separ e is needed, attach a se nown). Answer every comment	ated and your spo eparate sheet to th	use i	s not fili	ng with y	ou, do not includ	e informatio	n	
1.	Fill in your emplo information.	yment		Dalitar 4				Debtor 2 or non-filing spouse			
	If you have more th		Foods and date	Debtor 1					n-ming spou	156	
	job, attach a separ with information ab		Employment status	<ul><li>☐ Employed</li><li>✓ Not employed</li></ul>	ed			☐ Employed ☐ Not emplo	ved		
	additional employe		Occupation	Unemployed					,		
	Include part-time,	seasonal,	Сосиранон	<u></u>							
	or self-employed w	ork.	Employer's name								
	Occupation may in student or homema applies.		Employer's address	Number Street				Number Street			
								_			
				City		State Z	ip Code	City	State	Zip Code	
			How long employed t	here?						_	
P	art 2: Give D	etails Ab	out Monthly Incom	e							
			ne date you file this forr		ina to	report fo	or any line	write \$0 in the sn	ace Include	VOUL	
	n-filing spouse unless		•	n. II you have nou	ing to	теропти	n arry mile	s, write to in the sp	acc. molade	youi	
-			e more than one employ parate sheet to this form.	er, combine the info	ormati	on for al	l employe	ers for that person o	on the lines b	elow. If	
						For De	otor 1	For Debtor 2 non-filing spe			
2.			alary, and commissions d monthly, calculate what		2.		\$0.00		_		
3.	Estimate and list	monthly ov	ertime pay.		3	·	\$0.00	<u> </u>	<u>—</u> _		
4.	Calculate gross in	ncome. Ad	ld line 2 + line 3.		4.		\$0.00				

Debto	or 1 Lloyd Douglas Dix		Case num	nber (if kn	iown) <u>1:2</u>	21-bk	κ-11749-M٦	T
		!	For Debtor 1		btor 2 or ing spouse	<u> </u>		
(	Copy line 4 here	4.	\$0.00					
	List all payroll deductions:		<b>*</b> 0.00					
	5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00					
	5b. Mandatory contributions for retirement plans	5b.	\$0.00					
	5c. Voluntary contributions for retirement plans	5c.	\$0.00					
	5d. Required repayments of retirement fund loans	5d.	\$0.00					
	5e. Insurance	5e.	\$0.00					
	5f. Domestic support obligations	5f.	\$0.00					
	5g. Union dues	5g.	\$0.00					
	5h. Other deductions.  Specify:	_ 5h. <b>+</b>	\$0.00					
	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$ .	6.	\$0.00					
	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00					
8.	List all other income regularly received:							
	Ba. Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00					
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.							
:	Bb. Interest and dividends	8b.	\$0.00					
1	Bc. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00					
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.							
:	8d. Unemployment compensation	8d.	\$0.00					
	Be. Social Security	8e.	\$0.00					
	Bf. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.							
	Specify:	8f.	\$0.00					
;	8g. Pension or retirement income	8g.	\$0.00					
;	Bh. Other monthly income. Specify:	8h. <b>+</b>	\$0.00					
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$0.00					
	Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$0.00	+		]=[	\$0.0	00_
1	State all other regular contributions to the expenses that you list in Sinclude contributions from an unmarried partner, members of your housel friends or relatives.	hold, yo	ur dependents, you					
	Do not include any amounts already included in lines 2-10 or amounts that	at are no	ot available to pay e	xpenses	listed in Sc	hedu		
;	Specify:				11.	+ 	\$0.0	<u>00</u>
i	Add the amount in the last column of line 10 to the amount in line 11. ncome. Write that amount on the Summary of Your Assets and Liabilities			,		_	so.e	00_
	f it applies. Do you expect an increase or decrease within the year after you file t	this for	m?				onthly inco	me
	<ul> <li>No.</li> <li>✓ Yes. Explain:</li> </ul> Debtor is currently unemployed and is explo			nities to	create in	come	<del></del>	

F	ill in this inform	nation to id	entify	your case:			Cho	ck if this	ie:		
	Debtor 1	Lloyd First Name		<b>Douglas</b> Middle Name	<b>Dix</b> Last Na	me		An ame A suppl	nded filing ement showing		
	Debtor 2 (Spouse, if filing)	First Name		Middle Name	Last Na	me		following	13 expenses as g date:	s of the	Э
	United States Bankı	ruptcy Court fo	r the:	CENTRAL DIST	. OF CALI	FORNIA		MM / DI	D/YYYY	_	
	Case number (if known)	1:21-bk-11						IVIIVI / DI	J/ 1111		
0	fficial Form 10	)6J					1				
S	chedule J: Yo	our Exper	nses								12/15
co na	rrect information. I	f more space	is need Answe	led, attach anothe er every question.	r sheet to t	ing together, both ar his form. On the top	-		-		-
1.	Is this a joint cas	e?									
2.	_ No	Debtor 2 live in s. Debtor 2 mi	ust file (	arate household?  Official Form 106J-	2, Expense:	s for Separate Housel	nold of	Debtor 2	2.		
	Do not list Debtor Debtor 2.	1 and		es. Fill out this information each dependent.		Dependent's relation Debtor 1 or Debtor		to to	Dependent's age		s dependent with you?
	Do not state the donames.	ependents'									Yes No Yes No Yes No Yes No Yes No Yes No Yes
3.	Do your expense expenses of peop yourself and you	ole other than		✓ No ☐ Yes						Ц	163
F	Part 2: Estima	ate Your Or	ngoing	g Monthly Expe	enses						
to	•	of a date afte	r the b		•	re using this form as supplemental Sched		•	•		ie
	clude expenses paid ch assistance and l		-		•				Your expens	ses	
4.				ses for your reside y rent for the groun				4	. <u> </u>		\$4,500.00
	If not included in	line 4:									
	4a. Real estate to	axes						4	a		\$550.00
	4b. Property, hon	neowner's, or r	enter's	insurance				4	·b		\$231.00
	4c. Home mainte	enance, repair,	and up	keep expenses				4	·C		\$150.00
	4d. Homeowner's	s association o	r condo	minium dues				4	d.		

Deb	tor 1	Lloyd Douglas Dix	Case number (if known)	1:21-bk-11749-MT
			Your e	expenses
5.	Addit	ional mortgage payments for your residence, such as home equity loans	5.	
6.	Utiliti			
	6a. E	Electricity, heat, natural gas	6a.	\$1,000.00
		Water, sewer, garbage collection	6b.	\$400.00
	6c. 1	Felephone, cell phone, Internet, satellite, and	6c.	\$385.00
		cable services		40.50.00
-		Other. Specify: mobile and home phones	6d	\$350.00
7.		and housekeeping supplies	7. –	\$600.00
8.		care and children's education costs	8	
9.		ing, laundry, and dry cleaning	9	\$50.00
		onal care products and services	10	\$100.00
11.		cal and dental expenses	11	\$300.00
12.		sportation. Include gas, maintenance, bus or train Do not include car payments.	12	\$250.00
13.		tainment, clubs, recreation, newspapers, zines, and books	13	\$100.00
14.	Chari	table contributions and religious donations	14.	
15.	Insur	ance.		
	Do no	ot include insurance deducted from your pay or included in lines 4 or 20.		
	15a.	Life insurance	15a	\$450.00
	15b.	Health insurance	15b	\$1,250.00
	15c.	Vehicle insurance	15c	\$750.00
	15d.	Other insurance. Specify:	15d	
16.	Taxes Speci	, , ,	16	
17.	Instal	llment or lease payments:		
	17a.	Car payments for Vehicle 1	17a	
	17b.	Car payments for Vehicle 2	17b	
	17c.	Other. Specify:	17c	
	17d.	Other. Specify:	17d	
18.		payments of alimony, maintenance, and support that you did not report as cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18	
19.	Other Speci	payments you make to support others who do not live with you. fy:	19.	
20.		real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a	
	20b.	Real estate taxes	20b	
	20c.	Property, homeowner's, or renter's insurance	20c	
	20d.	Maintenance, repair, and upkeep expenses	20d	
	20e.	Homeowner's association or condominium dues	20e.	

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Debtor 1		Lloyd Douglas Dix	Case number (if known)	1:21-bk-11749-MT		
21.	Other.	. Specify:	21. +_			
22.	Calcu	late your monthly expenses.				
	22a.	Add lines 4 through 21.	22a	\$11,416.00		
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b			
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$11,416.00		
23.	Calcu	late your monthly net income.				
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a	\$0.00		
	23b.	Copy your monthly expenses from line 22c above.	23b. <b>–</b> _	\$11,416.00		
		Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	(\$11,416.00)		
24.	Do yo	u expect an increase or decrease in your expenses within the year after you fil	le this form?			
	For ex					
	<b>√</b> N	lo.				
	□ Y	Yes. Explain here: None.				

	ionnation to			
Debtor 1	Lloyd First Name	Douglas Middle Name	Dix Last Name	_
Debtor 2 (Spouse, if filing)		Middle Name	Last Namo	_
		or the: CENTRAL DIS		
Case number	inkrupicy Court is	or the. CENTRAL DIS	OF CALIFORNIA	
(if known)				☐ Check if this is an amended filing
Official Form	106Dec			
Declaration	About an	Individual Debi	tor's Schedules	12/15
\$250,000, or impri			18 U.S.C. §§ 152, 1341, 151	a bankruptcy case can result in fines up to 9, and 3571.
Did you pay o		someone who is NOT	an attorney to help you fill	out bankruptcy forms?
Did you pay o		someone who is NOT	an attorney to help you fill	out bankruptcy forms?
<b>⊠</b> No		someone who is NOT	an attorney to help you fill	out bankruptcy forms?  Attach Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119).

		ormation to id					
De	ebtor 1	Lloyd First Name	Dougla Middle N		<del></del>		
	ebtor 2 pouse, if filing)	First Name	Middle N	ame Last Name			
Ur	nited States Ba	nkruptcy Court for	r the: <b>CENT</b>	RAL DIST. OF CALIF	ORNIA		
Ca	ase number known)	1:21-bk-11749				☐ Check if the amended	
Of	ficial Form	107					· ·
			Affairs f	or Individuals F	iling for Bankr	untcv	04/19
you	rect information r name and ca	on. If more space use number (if kn	e is needed, a own). Answ	• •	t to this form. On the t	e equally responsible for a copy of any additional page	
1.	What is your  ☐ Married ☐ Not marrie	current marital s	status?				
2.	☑ No	• • •		where other than whe	·	w.	
3.	(Community p					ity property state or terri rada, New Mexico, Puerto I	
	☐ No ☑ Yes. Mak	ke sure you fill out	Schedule H:	Your Codebtors (Officia	ıl Form 106H).		
P	art 2: Ex	plain the Soul	rces of You	ur Income			
4.	Fill in the total If you are filing	amount of incom	e you receive	nt or from operating a led from all jobs and all become that you receive to	usinesses, including par		alendar years?
				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
	•	f the current yea for bankruptcy:	r until [	☐ Wages, commissions bonuses, tips	\$60,000.00	Wages, commissions, bonuses, tips	
			E	Operating a business		Operating a business	
	the last calend	-	[	☐ Wages, commissions bonuses, tips	\$125,000.00 (est.)	Wages, commissions, bonuses, tips	
(Jar	nuary 1 to Dece	ember 31, <b>2020</b> YYYY	<u>)</u>	✓ Operating a business		Operating a business	
For	the calendar y	ear before that:	[	☐ Wages, commissions	, \$175,000.00 (est.)	☐ Wages, commissions,	

(January 1 to December 31, 2019 )

bonuses, tips

Operating a business

bonuses, tips

Operating a business

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Debtor 1		Lloyd Douglas Dix	Case number (if known)	1:21-bk-11749-MT					
5.	Include unemplo	ou receive any other income during this year or the two previous calendar years?  de income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; aployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; pambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under or 1.							
	List eacl	h source and the gross income from each source separ	rately. Do not include income that you listed in	line 4.					
	✓ No ☐ Yes								
Р	art 3:	List Certain Payments You Made Before	You Filed for Bankruptcy						
6.	Are eith	ner Debtor 1's or Debtor 2's debts primarily consume	er debts?						
	□ No.	Neither Debtor 1 nor Debtor 2 has primarily cons "incurred by an individual primarily for a personal, fa		1 U.S.C. § 101(8) as					
		During the 90 days before you filed for bankruptcy, o	did you pay any creditor a total of \$6,825* or mo	ore?					
		☐ No. Go to line 7.							
		· ·	a total of \$6,825* or more in one or more paym include payments for domestic support obligat clude payments to an attorney for this bankrupto	ions, such as					
		* Subject to adjustment on 4/01/22 and every 3 year	s after that for cases filed on or after the date of	f adjustment.					
	<b>✓</b> Yes	. Debtor 1 or Debtor 2 or both have primarily const	or 1 or Debtor 2 or both have primarily consumer debts.						
		During the 90 days before you filed for bankruptcy, of	did you pay any creditor a total of \$600 or more	tor a total of \$600 or more?					
		No. Go to line 7.							
		Yes. List below each creditor to whom you paid a creditor. Do not include payments for dome Also, do not include payments to an attorned	estic support obligations, such as child support						
7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony.								
	✓ No ☐ Yes	. List all payments to an insider.							
8.		I year before you filed for bankruptcy, did you make	any payments or transfer any property on a	ccount of a debt that					
		payments on debts guaranteed or cosigned by an insid	er.						
✓ No  ☐ Yes. List all payments that benefited an insider.									

Debtor 1 Lloy	d Douglas Dix		Case number (if known)	1:21-bk-11749-MT
Part 4: Ide	entify Legal Acti	ions, Repossessions, and Forec	osures	
9. Within 1 year List all such n	before you filed fo	or bankruptcy, were you a party in any la rsonal injury cases, small claims actions, o	awsuit, court action, or administr	
☐ No ☑ Yes. Fill	in the details.			
Case title		Nature of the case	Court or agency	Status of the case
Jniversal Accou	ınts, LLC v. Dix	Legal malpractice	Los Angeles Superior Cou	rt Pending
			Court Name	<del>-</del> -
			Number Street	
Case number 205	STCV01672	-		Conclude
			City State	ZIP Code
			•	
Case title		Nature of the case	Court or agency	Status of the case
Carole Smith v.	Dix		Los Angeles Superior Cou Court Name	Pending
			Court Name	
			Number Street	<b>-</b>
Case number 19E	CF00805	-		Conclude
			City State	ZIP Code
Case title		Nature of the case	Court or agency	Status of the case
Capital One Bar	ık v. Dix	Credit card collection	Los Angeles Superior Cou	rt Pending
			Court Name	
			Number Street	On appea
Case number 12E	E09591	_		Conclude
			City State	ZIP Code
Case title		Nature of the case	Court or agency	Status of the case
State Bar of Cal	ifornia v. Lloyd	Client security fund		Pending
Douglas Dix			Court Name	
			Number Street	On appea
Case number		-		Conclude
			City State	ZIP Code
Case title		Nature of the case	Court or agency	Status of the case
Network Comm	ercial Services	Suit relating to unpaid tuition to	Los Angeles Superior Cou	rt Pending
v. Dix		Viewpoint School going back to	Court Name	<del>_</del>
		2013	Number Street	On appea
Case number 13/	A16308	_		<b>☑</b> Conclude

City

ZIP Code

Deb	tor 1	Lloyd Douglas Dix	Case n	umber (if know	n) <u>1:2</u>	21-bk-11	749-MT		
10.	seized,	year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, or levied? Il that apply and fill in the details below.							
		Go to line 11.  Fill in the information below.							
11.	1. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?								
	✓ No ☐ Yes	. Fill in the details.							
12.		l year before you filed for bankrup s, a court-appointed receiver, a cu	tcy, was any of your property in the posses istodian, or another official?	sion of an ass	ignee fo	or the ber	nefit of		
	✓ No ☐ Yes								
Pa	art 5:	List Certain Gifts and Con	tributions						
13.	Within 2	2 years before you filed for bankru	ptcy, did you give any gifts with a total valu	e of more thar	\$600 p	er persor	1?		
	✓ No ☐ Yes	. Fill in the details for each gift.							
14.	Within 2 to any o	-	ptcy, did you give any gifts or contributions	with a total v	alue of r	more thar	n \$600		
	✓ No ☐ Yes	. Fill in the details for each gift or co	ontribution.						
Pa	art 6:	List Certain Losses							
15.		l year before you filed for bankrup saster, or gambling?	tcy or since you filed for bankruptcy, did yo	u lose anythir	ng beca	use of the	eft, fire,		
	□ No ✓ Yes	. Fill in the details.							
	cribe the loss occ	property you lost and how urred	Describe any insurance coverage for the lo Include the amount that insurance has paid. insurance claims on line 33 of Schedule A/B:	List pending Ic	ate of y	our	Value of property lost		
Dek lead dan sign Cor inst exp hav and che lend che	otor paid cand in nage ca ned a co nstructio urance i ected to e subst I the ins ck paya der PNC ck to Pl	sidence suffered a slab leak. d plumber for repairing the surance has covered used by the leak. Debtor ontract with Purple on pledging them 100% of any reimbursement, which is be around \$41,000. They antially performed the work urance company issued a able jointly to debtors and c, and has forwarded the NC for signature and then will Purple Construction for the		Troporty.	6/20	021	\$41,000.00		

Deb	tor 1	Lloyd Douglas Dix		Case number (if ki	nown) <u>1:21-bk-1</u>	1749-MT			
Pa	art 7:	List Certain Payments or	Transfers						
16.		1 year before you filed for bankrup you consulted about seeking ban	• •		or transfer any pro	perty to			
	Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy.								
	✓ No ☐ Yes. Fill in the details.								
17.		1 year before you filed for bankrup who promised to help you deal w				perty to			
Do not include any payment or transfer that you listed on line 16.									
	✓ No ☐ Yes	s. Fill in the details.							
18.		2 years before you filed for bankru ty transferred in the ordinary cours			perty to anyone, ot	ther than			
		both outright transfers and transfers include gifts and transfers that you h		-	r mortgage on your	property).			
	✓ No ☐ Yes	s. Fill in the details.							
19.		10 years before you filed for banking a beneficiary? (These are often			ust or similar devi	ce of which			
	✓ No ☐ Yes	s. Fill in the details.							
Pa	art 8:	List Certain Financial Acc	ounts, Instruments, Sa	fe Deposit Boxes, and	Storage Units				
20.	benefit Include houses  No	1 year before you filed for bankrup, closed, sold, moved, or transferred checking, savings, money market, or pension funds, cooperatives, associate. Fill in the details.	ed? or other financial accounts; cer	tificates of deposit; shares ir					
			Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved,	Last balance before closing or transfer			
	se Bar	nk cial Institution			or transferred				
IVAIII	c or r irrain	old institution	XXXX		2020	\$0.00			
Num	ber Str	eet		Money market Brokerage Other					
City		State ZIP Code	•						
Cha	Last 4 digits of account  Type of account or  Date account  Last balance   number  instrument  was closed, before closing   sold, moved, or transfer   or transferred								
		cial Institution	XXXX-	Checking	2020	\$0.00			
Number Street				Savings  Money market  Brokerage  Other					
City		State ZIP Code							

# Case 1:21-bk-11749-MT Doc 14 Filed 11/05/21 Entered 11/05/21 13:13:08 Desc Main Document Page 43 of 56

Deb	otor 1	Lloyd Douglas Dix	Case number (if known) 1:21-bk-11749-MT
21.		u now have, or did you have within 1 year before you filed for bankrupto curities, cash, or other valuables?	, any safe deposit box or other depository
	✓ No ☐ Yes	es. Fill in the details.	
22.	<b>☑</b> No	you stored property in a storage unit or place other than your home with ones. Fill in the details.	in 1 year before you filed for bankruptcy?
Р	art 9:	Identify Property You Hold or Control for Someone Else	
23.	•	u hold or control any property that someone else owns? Include any pro d in trust for someone.	pperty you borrowed from, are storing for,
	✓ No ☐ Yes	es. Fill in the details.	
Р	art 10:	Give Details About Environmental Information	
For	the purp	pose of Part 10, the following definitions apply:	
- 1	hazardoı	nmental law means any federal, state, or local statute or regulation concerns or toxic substance, wastes, or material into the air, land, soil, surface or statutes or regulations controlling the cleanup of these substances, was the cleanup of these substances.	water, groundwater, or other medium,
		ans any location, facility, or property as defined under any environmenta or used to own, operate, or utilize it, including disposal sites.	al law, whether you now own, operate, or
		ous material means anything an environmental law defines as a hazardonce, hazardous material, pollutant, contaminant, or similar item.	us waste, hazardous substance, toxic
Rep	ort all n	notices, releases, and proceedings that you know about, regardless of w	hen they occurred.
24.	Has an	ny governmental unit notified you that you may be liable or potentially lia	ble under or in violation of an environmental
	✓ No ☐ Yes	es. Fill in the details.	
25.	-	you notified any governmental unit of any release of hazardous material?	•
	✓ No ☐ Yes	es. Fill in the details.	
26.	Have you	ou been a party in any judicial or administrative proceeding under any 6.	environmental law? Include settlements and
	✓ No ☐ Yes	es. Fill in the details.	

Debtor 1	Lloyd Douglas Dix		Case number (if known)	1:21-bk-11749-MT		
Part 11:	Give Details About Yo	ur Business or Connections to An	y Business			
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?						
	A member of a limited liability A partner in a partnership An officer, director, or managi	oyed in a trade, profession, or other activity, or company (LLC) or limited liability partnership on executive of a corporation evoting or equity securities of a corporation	either full-time or part-time o (LLP)	ł		
_	<ul> <li>None of the above applies. G</li> <li>Check all that apply above ar</li> </ul>	o to Part 12. nd fill in the details below for each business.				
Dix and As		Describe the nature of the business Collection law firm. Closed in 2020.	Employer Identifica Do not include Soc	ation number ial Security number or ITIN.		
Business Nam	holland Hwy		EIN:			
	reet	Name of accountant or bookkeeper	Dates business ex	sted		
PMB 414			From	то 2020		
Calabasas	CA 91302 State ZIP Code					
⊠ No	s. Fill in the details below.	r other parties.				
that answer	rs are true and correct. I unde	et of Financial Affairs and any attachments irstand that making a false statement, con inkruptcy case can result in fines up to \$2 id 3571.	cealing property, or obta	aining money or		
X Lloyd Do	Duglas Dix, (Peptor 1 11/05/2021	X Signature of Debtor 2 Date	<del></del>			
Did you atta	ach additional pages to Your S	tatement of Financial Affairs for Individua	is Filing for Bankruptcy	(Official Form 107)?		
☑ No □ Yes						
Did you pay	y or agree to pay someone wh	o is not an attorney to help you fill out bar	nkruptcy forms?			
☑ No ☐ Yes. Na	ame of person			otcy Petition Preparer's Notice, gnature (Official Form 119).		

Fill in this information to identify your case:					
Debtor 1	Lloyd First Name	<b>Douglas</b> Middle Name	<b>Dix</b> Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court f	or the: <b>CENTRAL DIS</b>	T. OF CALIFORNIA		
Case number (if known)	1:21-bk-1174	19-MT			

#### Official Form 108

#### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

### Part 1: List Your Creditors Who Hold Secured Claims

1.	For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D), fill in the information below.							
	Identify the creditor and the property that is collateral			at do you intend to do with the perty that secures a debt?	Did you claim the property as exempt on Schedule C?			
	Creditor's name:	PNC Mortgage		Surrender the property.  Retain the property and redeem it.		No Yes		
	Description of property securing debt:	Residence		Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:  Debtor will continue making pay reaffirming.		ts to creditor without		
	Creditor's name:	Universal Accounts LLC		Surrender the property. Retain the property and redeem it.		No Yes		
	Description of property securing debt:	Residence		Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:				
	Creditor's name:	Wilchfort Family Trust		Surrender the property. Retain the property and redeem it.		No Yes		
	Description of property securing debt:	2nd trust deed		Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Debtor will continue making pay	men	ts to creditor without		

reaffirming.

Debtor 1	Lloyd	Douglas Dix		Case number (if known)		
ldenti	ify the cr	editor and the property that is collateral		at do you intend to do with the perty that secures a debt?	Did you claim the property as exempt on Schedule C?	
Credit name:		Wilchfort Family Trust		Surrender the property. Retain the property and redeem it.	□ No □ Yes	
Descr	iption of rtv	2nd trust deed		Retain the property and enter into a Reaffirmation Agreement.		
	ing debt:			Retain the property and [explain]: Debtor will continue making pay- reaffirming.	yments to creditor without	
Part 2:	List	Your Unexpired Personal Proper	ty Lease	s		
fill in the ir	nformatio	personal property lease that you listed in in below. Do not list roal estate leases, it y assume an unexpired personal propert	Jnexpired	loases are leases that are still in effec	t; the lease period has not	
Descr	ibe your	unexpired personal property leases		,	Will this lease be assumed?	
None	•					
Part 3:	Sign	Below				
	•	perjury, I declare that I have indicated m y that is subject to an unexpired lease.	ny intentio	n about any property of my estate tha	t secures a debt and	
x L	IS	1 D x				
1/	ouglas Dia 0/23/202	Sign	nature of D	ebtor 2		
	M / DD /	<del></del>		D / YYYY		

B2030 (Form 2030) (12/15)

#### **UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA** SAN FERNANDO VALLEY DIVISION

In	re Lloyd Douglas Dix	Ca	se No.	1:21-bk-11749-MT	
		Ch	napter	7	
	DISCLOSURE OF COMPE	ENSATION OF ATTORNE	Y FOR	DEBTOR	
1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debto that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptc is as follows:					
	For legal services, I have agreed to accept		\$5	,000.00	
	Prior to the filing of this statement I have received.			\$0.00	
	Balance Due		\$5	,000.00	
2.	The source of the compensation paid to me was:				
	☑ Debtor ☐ Other (spe	cify)			
3.	The source of compensation to be paid to me is:				
	☑ Debtor ☐ Other (spe	cify)			
4.	I have not agreed to share the above-disclose associates of my law firm.	ed compensation with any other per	son unles	ss they are members and	
	☐ I have agreed to share the above-disclosed coassociates of my law firm. A copy of the agree compensation, is attached.				
5.	In return for the above-disclosed fee, I have agree	d to render legal service for all aspe	ects of the	e bankruptcy case, including:	
	a. Analysis of the debtor's financial situation, and	rendering advice to the debtor in de	termining	whether to file a petition in	

- 5.
  - bankruptcy;
  - b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
  - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

10/23/2021

Date

David S. Hagen

Law Offices of David S. Hagen

16830 Ventura Blvd.

Suite 500

Encino, CA 91436-1795

Phone: (818) 990-4416 / Fax: (818) 990-5680

Lloyd Douglas Dix

Bar No. 110588

F	ill in this inf	ormation to	identify your case:			only as directed	l in this
П	ebtor 1	Lloyd	Douglas	Dix	form and in For	m 122A-1Supp:	
	CDIOI I	First Name	Middle Name	Last Name	1. There is no pres	sumption of abuse.	
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name	1 1	to determine if a pres s will be made under o culation (Official Forn	Chapter 7
U	nited States Bar	nkruptcy Court f	or the: <b>CENTRAL DIS</b>	T. OF CALIFORNIA	3. The Means Test		
	ase number f known)	1:21-bk-1174	19-MT			ary service but it coul	
					Check if this is a	n amended filing	
<u>O</u> 1	ficial Form	122A-1					
CI	napter 7 S	tatement o	of Your Current	Monthly Income			04/20
info are mil 122	ormation applie exempted fror itary service, c 2A-1Supp) with	es. On the top on a presumption omplete and file this form.	of any additional pages n of abuse because yo e Statement of Exempt	, write your name and ca u do not have primarily c ion from Presumption of	the line number to which to use number (if known). If yo consumer debts or because Abuse Under § 707(b)(2) (C	ou believe that you of qualifying	
F	art 1: Ca	iculate Your	Current Monthly In	ncome			
1.	What is your	marital and fili	ng status? Check one o	nly.			
	☐ Not mari	ried. Fill out Co	lumn A, lines 2-11.				
	Married	and your spou	se is filing with you. Fi	II out both Columns A and	B, lines 2-11.		
	Married	and your spou	se is NOT filing with yo	u. You and your spouse	are:		
	Livi	ng in the same	household and are not	legally separated. Fill ou	ut both Columns A and B, line	es 2-11.	
	dec	lare under pena	Ity of perjury that you and	d your spouse are legally s	2-11; do not fill out Column B separated under nonbankrupt ng the Means Test requireme	cy law that applies or	that you
	bankruptcy c August 31. If in the result.	ase. 11 U.S.C. the amount of y Do not include a	§ 101(10A). For exampour monthly income various income amount more	ole, if you are filing on Septed during the 6 months, act than once. For example,	red during the 6 full months tember 15, the 6-month perio dd the income for all 6 months if both spouses own the sam any line, write \$0 in the space	d would be March 1 to s and divide the total ne rental property, put	hrough by 6. Fill
					Debtor 1 Debt	mn B or 2 or filing spouse	
2.	•	rages, salary, ti	ps, bonuses, overtime,	and commissions			
3.	Alimony and if Column B is	-	ayments. Do not includ	le payments from a spouse	e		
4.	expenses of y regular contrib your depende	you or your depoutions from an interest, parents, and	e which are regularly poendents, including chi unmarried partner, meml d roommates. Include re not filled in. Do not inclu	Ild support. Include pers of your household, egular contributions from			

Net income from operating a business, profession, or farm    Debtor 1	Ebtor 1 Lloyd Douglas Dix			0	Case number (if k	nown) <u>1:21-bk-11749-MT</u>	
Gross receipts (before all deductions)  Ordinary and necessary operating — expenses  Copy Net monthly income from a business, profession, or farm  Net income from rental and other real property  Debtor 1 Debtor 2  Gross receipts (before all deductions)  Ordinary and necessary operating — expenses  Copy Net monthly income from rental or other real property  Dettor 1 Debtor 2  Gross receipts (before all deductions)  Ordinary and necessary operating — expenses  Copy Net monthly income from rental or other real property  Interest, dividends, and royalties  Unemployment compensation  Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:  For you.  For you.  Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuly, or allowance paid by the United States Government in connection with a disability, combar-terelated injury or genosion, pay, annuly, or allowance paid by the United States Government in connection with a disability, combar-terelated ripury only to extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10, then than chapter 61 of that title.  Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act, payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 160 th et saq.) with respect to the convastivus diseases 2019 (COVID-19); payments received as a victim of a war form, a crime against humanity, or international or domestic terrorism, or compensation, pension, pay, annutry, or allowance paid by the United States Government in connection with a disability, combart learnerism or compensation, pension, pay annutry, or allow						Debtor 2 or	
Gross receipts (before all deductions)  Ordinary and necessary operating — expenses  Ret monthly income from a business, profession, or farm  Net income from rental and other real property  Debtor 1 Debtor 2  Gross receipts (before all deductions)  Ordinary and necessary operating — expenses  Copy Net monthly income from rental or other real property  Interest, dividends, and royalties  Unemployment compensation  Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:	Net income from operating a busing	ness, profession,	or farm				
Ordinary and necessary operating — expenses — Copy here ⇒ Profession, or farm  Net income from rental and other real property  Debtor 1 Debtor 2  Gross receipts (before all deductions)  Ordinary and necessary operating — expenses — Copy here ⇒ Copy  Net monthly income from rental or other real property  Interest, dividends, and royalties  Unemployment compensation  Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:    For you.   For you.   For you spouse.    Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of that title. In the next sentence, do not include any benefits received under the posiciosis of the 10 other than chapter 61 of that title.  Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act. payments made under the Faderal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 160 et seq.) with respect to the connovirus diseases 2019 (COVID-19); payments raceived as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, contable related injury or disability, or desth of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.		Debtor 1	Debtor 2				
Ret monthly income from a business,							
Net income from a business, profession, or farm  Net income from rental and other real property  Debtor 1 Debtor 2  Gross receipts (before all deductions)  Ordinary and necessary operating —				Сору			
Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from rental or other real property Interest, dividends, and royalties Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:  For you.  For your spouse.  Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.  Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.	•	3,					
Gross receipts (before all deductions) Ordinary and necessary operating — — — expenses  Net monthly income from rental or other real property  Interest, dividends, and royalties Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:	Net income from rental and other	real property					
Ordinary and necessary operating — expenses  Net monthly income from rental or other real property  Interest, dividends, and royalties  Unemployment compensation  Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:		Debtor 1	Debtor 2				
Net monthly income from rental or other real property  Interest, dividends, and royalties  Unemployment compensation  Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:  For you.  For your spouse.  Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.  Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 160 et secq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.	• •						
Net monthly income from rental or other real property  Interest, dividends, and royalties  Unemployment compensation  Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:				Copy			
Unemployment compensation  Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:							
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For you	Unemployment compensation						
Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.  1. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.	benefit under the Social Security Act	t. Instead, list it he	ere: <b>↓</b>				
amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.	Pension or retirement income. Do was a benefit under the Social Secu next sentence, do not include any coallowance paid by the United States disability, combat-related injury or di uniformed services. If you received of title 10, then include that pay only amount of retired pay to which you was a benefit of the second of t	not include any arrity Act. Also, excompensation, pens Government in cosability, or death o any retired pay pa to extent that it do yould otherwise be	mount received that ept as stated in the sion, pay, annuity, onnection with a f a member of the id under chapter 61 toes not exceed the entitled if retired				
	amount. Do not include any benefits payments made under the Federal la declared by the President under the (50 U.S.C. 1601 et seq.) with respect (COVID-19); payments received as a humanity, or international or domest pay, annuity, or allowance paid by the connection with a disability, combatmember of the uniformed services.	received under the world received under the world received to the coronavirual victim of a war cric terrorism; or cone United States Grelated injury or distracted injury or dist	ne Social Security A national emergency cies Act s disease 2019 rime, a crime agains npensation, pensior overnment in sability, or death of	ct; st n,			
Total amounts from separate pages, if any.		.,					

Lloyd Douglas Dix	Case number (if known)
Sign Below	
gning here. Venclare under penalty of p	perjury that the information on this statement and in any attachments is true and correct.
oyd Douglas Dix Debtor 1	Signature of Debtor 2
ate 10/23/2021	Date
	Sign Below gning here, Venctor a wnder penalty of pour Douglas Dix Deptor 1

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Debtor 2 (Spouse, if filing) First Name Middle Name Last Name  United States Bankruptcy Court for the: CENTRAL DIST. OF CALIFORNIA  Case number (if known)  Check if this is an amended filin  Official Form 122A-1Supp  Statement of Exemption from Presumption of Abuse Under § 707(b)(2)	Debtor 1	Lloyd First Name	<b>Douglas</b> Middle Name	<b>Dix</b> Last Name	_
Case number (if known)  1:21-bk-11749-MT  Check if this is an amended filin  Official Form 122A-1Supp  Statement of Exemption from Presumption of Abuse Under § 707(b)(2)		First Name	Middle Name	Last Name	_
Official Form 122A-1Supp Statement of Exemption from Presumption of Abuse Under § 707(b)(2)	United States Ba	nkruptcy Court fo	or the: <b>CENTRAL DIS</b>	T. OF CALIFORNIA	_
Official Form 122A-1Supp Statement of Exemption from Presumption of Abuse Under § 707(b)(2)		1:21-bk-1174	9-MT		
Statement of Exemption from Presumption of Abuse Under § 707(b)(2)					Check if this is an amended fill
	Official Form	122A-1Su	рр		
"In this complement to not be unith. Charter 7 Statement of Very Correct Monthly Income (Official Form 4224.4) if you believe	Statement o	f Exemption	on from Presur	mption of Abuse I	Under § 707(b)(2)
File this supplement together with Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1), if you believe		ent together with	h Chapter 7 Statemen	t of Your Current Monthly	• • • • • • • • • • • • • • • • • • • •
	hat you are exem	pted from a pre	•	•	ate as possible. If two married people are if you, the other person should complete a
separate Form 122A-1 if you believe that this is required by 11 U.S.C. § 707(b)(2)(C).	hat you are exem iling together, an	pted from a pre d any of the exc	lusions in this statem	nent applies to only one of	f you, the other person should complete a

1.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a
	personal, family or household purpose." Make sure that your answer is consistent with the answer you gave at line 16 of the Voluntary
	Petition for Individuals Filing for Bankruptcy (Official Form 101).

Go to Form 122A-1; on the top of page 1 of that form, check box 1, There is no presumption of abuse, and sign Part 3. Then **√** No. submit this supplement with the signed Form 122A-1.

Yes. Go to Part 2.

2.

3.

### Determine Whether Military Service Provisions Apply to You

	<u>,                                    </u>				
Are you a disabled veteran (as defined in 38 U.S.C. § 3741(1))?					
☐ No. Go to line 3.					
Yes. Did you incur debts mostly while you were on active duty or while y 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).	Did you incur debts mostly while you were on active duty or while you were performing a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).				
No. Go to line 3.					
Yes. Go to Form 122A-1; on the top of page 1 of that form, on the supplement with the signed Form 122	check box 1, <i>There is no presumption of abuse</i> , and sign Part 3. 2A-1.				
Are you or have you been a Reservist or member of the National Guard?					
☐ No. Complete Form 122A-1. Do not submit this supplement.					
Yes. Were you called to active duty or did you perform a homeland defe	ense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1)				
No. Complete Form 122A-1. Do not submit this supplement.					
Yes. Check any one of the following categories that applies:					
I was called to active duty after September 11, 2001, for at least 90 days and remain on active duty.	If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check				
I was called to active duty after September 11, 2001, for at least 90 days and was released from active duty on which is fewer than 540 days before I file this bankruptcy case.	box 3, <i>The Means Test does not apply now</i> and sign Part 3. Then submit this supplement with the signed Form 122A-1. You are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The exclusion period means the time you are on active duty or are				
☐ I am performing a homeland defense activity for at	performing a homeland defense activity, and for 540 days				

check Form icial ion performing a homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii).

If your exclusion period ends before your case is closed, you may have to file an amended form later.

least 90 days.

least 90 days, ending on

☐ I performed a homeland defense activity for at

fewer than 540 days before I file this bankruptcy case.

\_, which is

12/15

Attorney or Party Name, Address, Telephone & FAX Nos., State Bar No. & Email Address	FOR COURT USE ONLY
DAVID S. HAGEN - SBN 110588 LAW OFFICES OF DAVID S. HAGEN 16830 Ventura Blvd., Suite 500 Encino, CA 91436-1795 (818) 990-4416 Fax (818) 990-5680 email: davidhagenlaw@gmail.com	
☐ Debtor(s) appearing without attorney ☐ Attorney for Debtor	
	ANKRUPTCY COURT LIFORNIA -SAN FERNANDO VALLEY DIVISIQ☑
In re:	CASE NO.: 1:21-bk-
LLOYD DOUGLAS DIX	CHAPTER: 7
	VERIFICATION OF MASTER MAILING LIST OF CREDITORS [LBR 1007-1(a)]
Debtor(s).	

Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attorney if applicable, certifies under penalty of perjury that the master mailing list of creditors filed in this bankruptcy case, consisting of \_\_\_\_ sheet(s) is complete, correct, and consistent with the Debtor's schedules and I/we assume all responsibility for errors and omissions.

Date: 10/23/2021	- // V H
Date:	Signature of Debtor 1
· · · · · · · · · · · · · · · · · · ·	Signature of Debtor 2 (joint debtor) (if applicable
Date: 10/23/2021	A DAVID'S HAGEN

Signature of Attorney for Debtor (if applicable)

This form is optional. It has been approved for use in the United States Bankruptcy Court for the Central District of California

AWA Collections Attn: Banrkuptcy 100 Church Street Dickson, TN 37055

California Private Lenders 23945 Calabasas Rd., Suite 209 Calabasas, CA 91302

Capital One Attn: Bankruptcy PO Box 30285 Salt Lake City, UT 84130

Capital One Bank c/o Raymond Patenaude Patenaude & Felix APC 9619 Chesapeake Dr. #350 San Diego, CA 92123-1382

Capital One Bank c/o Patenaude & Felix 9616 Chesapeake Dr #300 San Diego, CA 92123

Carole Smith c/o Michael Jonathan Wise Perkins Coie 1888 Century Park East #1700 Los Angeles, CA 90067

Chase Card Services Attn: Bankruptcy PO Box 15298 Wilmington, DE 19850

Employment Development Dept PO Box 989061 W. Sacramento, CA 95798-9061

Franchise Tax Board PO Box 942867 Sacramento, CA 94267-0001 Harris & Harris 111 W. Jackson Blvd. Chicago, IL 60604

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Jimi Bingham 2843 Geary Place Unit 3106 Las Vegas, NV 89109

Judicial Legal Services 13351 Riverside D. D497-PMB Sherman Oaks, CA 91423

LA County Tax Collector PO Box 512102 Los Angeles, CA 90051-0102

Las Virgenes Municipal Water Dist. 4322 Las Virgenes Rd. Calabasas, CA 91302

Network Commercial Services c/o Aposta, Inc. 1057 E. Imperial Hwy Placentia, CA 92870

Pansky Markle 1010 Sycamore Ave #308 S. Pasadena, CA 91030

PNC Mortgage Attn: Bankruptcy PO Box 8819 Dayton, OH 45401 Providence Tarzana Hopsital 18321 Clark St. Tarzana, CA 91356

Ress Financial Corporation, Trustee 1780 Town & Country Drive Suite 105
Norco, CA 92860-3618

Southern California Edison Co. PO Box 6400 Rancho Cucamonga, CA 91729-6400

State Bar of California Client Security Fund 180 Howard St. San Francisco, CA 94105

Universal Accounts LLC c/o Guy Jamison Jamison Law Firm PC 301 E. Colorado Blvd. #510 Pasadena, CA 91101

Universal Accounts, LLC c/o Guy Jamison, Esq

Wilchfort Family Trust PO Box 25623 Los Angeles, CA 90025